	• _	
Application		A1
AUDIICATION	or Docker	Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10-799-406

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		15					RATE	FEE	7	RATE	FEE	
FOR NUMBER FILE		FILED	NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			39 minus 20=		* . (• . (9		X\$ 9=		OR	X\$18=	342
INDEPENDENT CLAIMS			minus 3 =		0			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT					ŢXI		+145=		OR	+290=	290	
* If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTAL		OR	TOTAL	1402	
CLAIMS AS AMENDED - PART II OTHER THAN												
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	PENIDENIT	CLAIM	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= OR +290=												
								TOTAL ODIT, FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		= .		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		▎┟					
							L	+145=		OR	+290=	•
							Ā	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum		(Column 3)	i		٠.		·:	•
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	•
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
`	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								Un		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											1	
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**	f the "Highest Nur	nn 1 is less than th mber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	L	TOTAL DDIT. FEE			TOTAL DDIT. FEE	